

Located at: 9773 Mt. Hope Road Munith, MI 49259 Mail to: 9773 Mt. Hope Road, Munith, MI 49259 517-596-8200 office/517-596-8600 fax

Hours: 9 AM - 1 PM Monday - Tuesday - Thursday

1PM-5PM Wednesday

www.waterlootwomi.gov

	7	
Parcel - A #		
Parcel - B #		
New Combine	d Parcel #	

LAND COMBINATION APPLICATION

You <u>MUST</u> answer all questions and include all attachments or this application will be returned to you. Bring or mail the application to Assessor's Office at the address listed above.

Fill in to whom and where you want this form sent when the review is completed.

(Please Print)				
Name:				
Address:				
City: State:	Zip:			
This form is designed to comply with applicable local zoning.				
1. LOCATION PARCEL – A:				
Street Number:	Road Name:			
Parent Parcel Number:				
Legal Description: (Attach extra sheets if needed)				
2. LOCATION PARCEL B:				
Street Number:	Road Name:			
Parcel Number:				
Legal Description: (Attach extra sheets if needed)				

3.	APPLICANT information (if not the prope	rty owner):		
Contact Person:		Phone:		
Business Name:		Address:		11-11-11-11-11-11-11-11-11-11-11-11-11-
		City:	State:	Zîp:
4. Leg	al description and acreage of the proposed ne	w combined parcel: (Attach extra	sheets if needed)	
		50		
	•			
6.	DEVELOPMENT SITE LIMITS — Check ☐ is in a DNR designated critical sand dun ☐ is riparian or littoral (is a river or lake fr ☐ is affected by a Great Lake High Risk E ☐ includes a wetland. ☐ includes a beach. ☐ is within a flood plain. ☐ includes slopes more than twenty-five p ☐ is on muck soils or soils known to have ☐ is known or suspected to have an aband	te area. cont parcel). rosion setback. ercent (a 1:4 pitch or 14° angle) or severe limitations for on-site sewa	r steeper. age system.	either A or B:
7.	ATTACHMENTS (all attachments must b	e included) Letter each attachme	ent as shown here.	
	A. Proof of ownership (copy of recorded	l deed).		
	B1. A survey, sealed by a professional sur	veyor of proposed combination of	f parcel – A and parcel – B	l.
	The survey or map must show: (1) Current boundaries (as of March (2) All previous divisions made after (3) The proposed combination, and (4) Dimensions of the proposed com (5) Existing and proposed road/easer (6) Easements for public utilities from (7) Locate setbacks of any existing in (8) Any of the features checked in quality of the company of the proposed company of the features checked in quality of the features checked in quality of the company of the features checked in quality of the company of the features checked in quality of the company of the features checked in quality of the company of the features checked in quality of the company of the features checked in quality of the company of the features checked in quality of the company	March 31, 1997 (indicate when note that ion, and ments right-of-way, and meach parcel to existing public ut improvements (building, well, septendent).	tility facilities, and ic systems, driveways, etc.	
	C. A son evaluation of septic system per	io source distant		

- proposed parcel is serviced by a public sewer system.
- D. An evaluation/indication of approval will occur or a well permit for potable water for each proposed parcel prepared by the Health Department, or each proposed parcel os serviced by a public water system for parcels less than 1 acre.
- E. Indication of approval or permit from County Road Commission, MDOT, or respective city/village street administer, for each proposed new road, easement or shared driveway.
- F. A copy of any transferred division rights.
- G. A fee of \$150.00 for the proposed combination of parcel A and parcel B will be required before any review will take place.

	I.	Other (please list):			
9.	AFFIDAVIT and permission for municipal, county, and state officials to enter the property for inspection: I agree the statements made above are true and if found not to be true, this application and any approval will be void. Futher, I agree to comply with the conditions and regulations provided with this parent parcel division. Futher, I agree to give permission for officials of the municipality, county and the state of Michigan to enter the property where this parcel division is proposed for purposes of inspection to verify that the informatio on the application is correct at a time mutually agreed with the applicant. Finally, I understand this is only a parcel division which conveys only certain rights under the applicable local land division ordinance, the local zoning ordinance, and the State Land Division Act (formerly the Subdivision Control Act. P.A. 288 of 1967, as amended (particularly by P.A. 591 of 1996), MCL 560.101 et. seq.) and does not include any representation or conveyance of rights in any other statute, building code, zoning ordinance, deed restriction or other property rights. Finally even if this division is approved I understand zoning, local ordinances and State Acts change fron time to time and if changed the divisions made here must comply with the new requirements (apply for division approval again) unless deeds, land contracts, leases or surveys representing the approved divisions are recorded with the Register of Deeds or the division is built upon before the changes to laws are made.				
PROPE	RTY	OWNER'S SIGNATURE: DATE:			
		DO NOT WRITE BELOW THIS LINE:			
Review	er's	Action:			
-		Approved: Conditions. if any:			
		Denied: Reasons (cite §):			
Signatu	re an	nd date:			
Total Fe	ee \$ _	Check #			

H. Insufficient information requiring additional committee review will be billed at \$180.00 per meeting.